



16711 U.S. PTO

Docket Number RIA 57697/C1

FILING BY "EXPRESS MAIL" UNDER 37 CFR §1.10

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March 15, 2004
Date of Deposit

Address to: Commissioner for Patents
Box Patent Application
P.O. Box 1450
Alexandria, VA 22313-1450

UTILITY PATENT APPLICATION TRANSMITTAL AND FEE SHEET

Transmitted herewith for filing under 37 CFR §1.53(b)(1) is a **continuation** of prior Application No. 09/874,955, filed June 5, 2001.

Applicant (or identifier): SCHER, ET AL.

Title: NOVEL EMULSIONS

Enclosed are:

1. ☒ Specification (Including Claims and Abstract) - 44 pages
 2. ☐ Drawings - sheets
 3. Declaration and Power of Attorney
 - a. ☐ Newly executed (original or copy)
 - b. ☒ Copy from a prior application (signed or with indication that original was signed)
 - i. ☐ Deletion of Inventors
Signed statement attached deleting inventor(s) named in the prior application
 4. ☒ Incorporation By Reference
The entire disclosure of the prior application, from which a copy of the Declaration and Power of Attorney is supplied under Box 3b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.
 5. ☐ Microfiche Computer Program (appendix)
 6. Nucleotide and/or Amino Acid Sequence Submission
 - ☐ Computer Readable Copy
 - ☐ Paper Copy
 - ☐ Statement Verifying Identity of Above Copies
 7. ☐ Preliminary Amendment
 8. ☐ Assignment Papers (Cover Sheet & Document(s))
 9. ☐ English Translation of
 10. ☒ Information Disclosure Statement
 11. ☐ Certified Copy of Priority Document(s)
 12. ☒ Return Receipt Postcard
 13. ☒ Other: Credit Card Payment Form
- ☒ The right to elect an invention or species that is different from that elected in parent Application No. 09/874,955 in the event of a restriction or election of species requirement that is identical or substantially similar to that made in said parent application is hereby reserved.

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Filing fee calculation:

- ☐ Before calculating the filing fee, please enter the enclosed Preliminary Amendment.
☐ Before calculating the filing fee, please cancel claims

Basic Filing Fee								\$	770
Multiple Dependent Claim Fee (\$ 280)								\$	
Foreign Language Surcharge (\$ 130)								\$	
	For	Number Filed		Number Extra		Rate			
Extra Claims	Total Claims	17	-20	0	x	\$	18	=	\$ 0
	Independent Claims	1	-3	0	x	\$	84	=	\$ 0
TOTAL FILING FEE								\$	770

- ☒ Enclosed herewith is a Credit Card Payment Form for payment of any fees associated with this paper. If you are unable to charge this payment to the credit card for any reason, please charge the required fees to Deposit Account No. 50-1676 in the name of Syngenta Crop Protection, Inc. The Commissioner is hereby authorized to charge any additional fees under 37 CFR §1.17 which may be required, or credit any overpayment, to Account No. 50-1676 in the name of Syngenta Crop Protection, Inc.

Please address all correspondence to the address associated with Customer No. 0026748, which is currently:

Syngenta Crop Protection, Inc.
Patent and Trademark Dept.
410 Swing Road
Greensboro, NC 27409

Please direct all telephone calls to the undersigned at the number given below and all telefaxes to (336) 632-2012.

Respectfully submitted,

Date: March 15, 2004


Thomas Hamilton
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Reg. No. 40,464
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